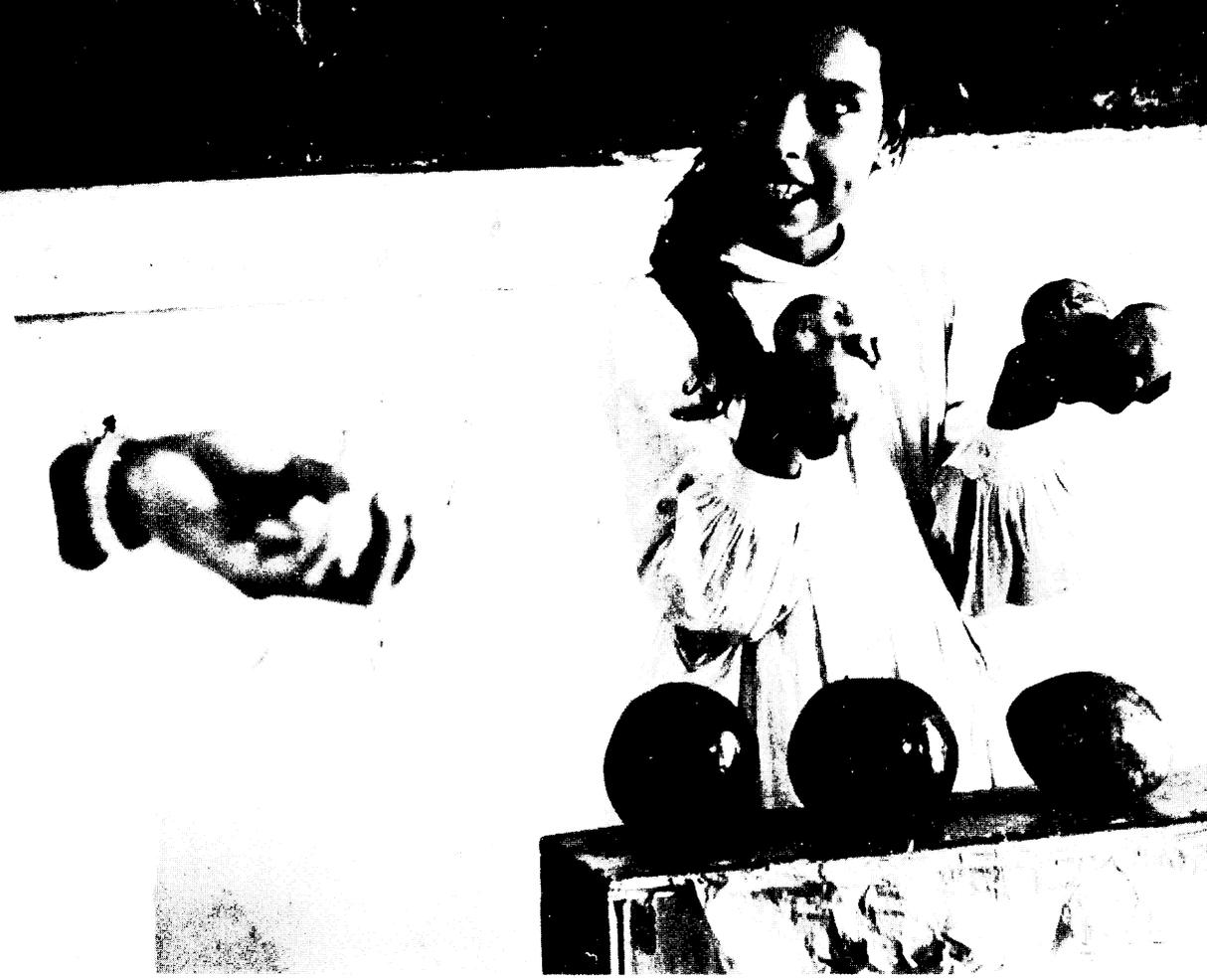




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POLIOMYELITIS SURVEILLANCE UNIT, COMMUNICABLE DISEASE CENTER, PUBLIC HEALTH SERVICE: *Surveillance of poliomyelitis in the United States, 1958-61. Public Health Reports, Vol. 77, December 1962, pp. 1011-1020.*

The National Poliomyelitis Surveillance Program, created by the Surgeon General of the Public Health Service in April 1955, serves as a clearinghouse for the collection, analysis, and dissemination of pertinent epidemiologic information on poliomyelitis in the United States.

During the years 1958-61, more than 18,500 persons in the United States were affected with an illness classified as poliomyelitis. Almost 14,000 of these patients were classified as having paralytic poliomyelitis. In 1961 less than 1,000 paralytic cases occurred, representing the lowest incidence since reporting began.

Extensive, individual case investigations by State epidemiologists have been carried out during these years. These investigations have yielded sharply defined

measures of incidence and experience with poliomyelitis. In each of these years, analysis of incidence by age indicates a preponderance of preschool-age children with a secondary peak in the 20- to 29-year age group. An average of 63 percent of all patients with paralysis reported from 1958 to 1961 had received no formaldehyde-inactivated vaccine. Among those classified as having paralytic disease, 20 to 24 percent were severely disabled and 9 to 10 percent were fatalities.

Poliovirus isolations have been made from 77 to 78 percent of paralytic cases with residual paralysis. Type 1 poliovirus has been preponderant during each of these years; however, type 3 polioviruses were implicated 38.5 percent of the time in 1961. Type 2 isolates have been rare.

SHUMWAY, ROBERT H. (Public Health Service): *Mathematical model of transport mechanisms influencing strontium 90 levels in milk. Public Health Reports, Vol. 77, December 1962, pp. 1055-1064.*

A mathematical model has been developed for the purpose of predicting strontium 90 concentrations in milk. It is the successor of several other models designed to predict the activity of radionuclides in milk. A relatively large yield of strontium 90 is deposited on the surface of the earth as a result of nuclear weapons tests. This radionuclide then finds its way through the food chain to human beings. Milk is one of the most important contributors to the total dietary intake.

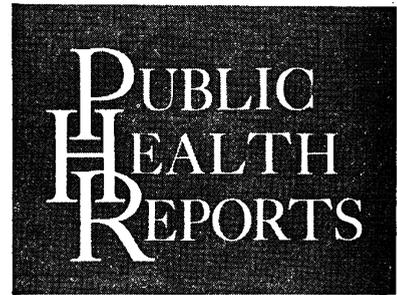
The strontium 90 is deposited on the pasture. Some is retained on the foliage and some is taken up by the soil. Precipitation causes some of the strontium 90 to be washed off and additional amounts are depleted by grazing. The cattle, however, may be in the barn during a portion of the year consuming feed obtained during the previous harvest season. The level of strontium 90 in milk, therefore, reflects the concentration of strontium 90 in the pasture feed and

in the barn feed. Based on these assumptions, the model includes the following factors: deposition rate, rate of absorption from the soil, the residence time of strontium 90 on the plant, and the proportion of cows on pasture feed and of cows on barn feeding. The derived equation allows values for specific areas to be considered for a particular time period.

The model is fitted to approximately 5 years of observed milk measurements from five metropolitan areas comprising the original raw milk sampling network. Deviations of the observed values from those given by the model are interpreted as fluctuations arising from experimental error or secondary perturbations or both. Calculated values were generally found to be reasonable. A higher degree of reliability in predictions of deposition may result in more accurate predictions of strontium 90 concentrations in milk. Modifications of the transport assumptions may be necessary.

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TUCKER, CECIL B. (Tennessee Department of Public Health), **CAMERON, GEORGE M., BUCHANAN, RUFUS L., DILLON, ANN, and GRAYSON, JOHN H.:** *An evaluation of the Kolmer Reiter protein and fluorescent treponemal antibody tests.* *Public Health Reports, Vol. 77, December 1962, pp. 1089-1094.*

A study of 842 blood specimens which gave reactions in a range of 1 to 4 dilutions with the VDRL tube test was undertaken to determine the relative sensitivity and specificity of the Kolmer Reiter protein (KRP) and the fluorescent treponemal antibody (FTA) tests as well as the significance of low titer VDRL serologic tests for syphilis.

The FTA test showed high specificity and relatively high sensitivity when compared with the *Treponema pallidum* immobilization (TPI) test. The KRP test showed low sensitivity when compared with the TPI and FTA tests.

For patients with unexplained low titer VDRL tests as well as for patients with no historical or clinical evidence of syphilis infection whose VDRL tests show high titers, the FTA test appears to be a reference test of choice. Approximately 10 percent of blood specimens yielding low titer VDRL tests represented biologic false positive reactions when based on the FTA tests in this study.

The results of the study indicate a need for careful and complete evaluation of each patient with an unexplained low titer VDRL test.

The nature of a paper, not its importance or significance, determines whether a synopsis is printed. See "Information for Contributors."

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3. The synopsis should comprise a brief and factual summary of the contents and conclusions of the paper, a pointer to any new information which it may contain, and an indication of its relevance. It should enable the busy reader to decide more surely than he can from the mere title of the paper whether it merits his reading it.

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5. Use complete sentences rather than a mere list of headings. Any reference to the author of the article should be in the third person. Standard rather than proprietary terms should be used. Unnecessary contractions should be avoided. It should be presumed that the reader has some knowledge of the subject but has not read the paper. The synopsis should therefore be intelligible in itself without reference to the paper. (For example, it should not cite sections or illustrations by their numerical references in the text.)

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should indicate the subjects of the investigation.

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and

Public Health Monographs

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Public Health Monographs published concurrently with *Public Health Reports* in 1962 are listed in numerical order under the category heading MONOGRAPHS. The monograph summaries appearing in the journal are indexed under appropriate subject headings.

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645-734	August	8
735-826	September	9
827-918	October	10
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1011-1116	December	12

Key to Classification Code

- (*) Original, signed article
- (B) Brief
- (CR) Conference report
- (E) Excerpt
- (EN) Epidemiologic note
- (LN) Legal note
- (MS) Monograph summary
- (SR) Short report

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